Sheet 1 of 1 Exp. Mail No. EL 820487853US

												Exp. N	Iail No. EL	820487	853US
FORM PTO-1449 U.S. DEPARTMENT OF											ATTY. DOCKET SERIA			NO.:	PTO
COMMERCE, PATENT AND TRADEMARK OFFICE											NO.: CAPH 8016US				
INFORMATION DISCLOSURE STATEMENT BY APPLICANT											APPLICANT: Bakulesh M. Khamar				
											6/2/.				
(Use several sheets if necessary)											Filing Date: X	125/0	Group:	165	/
								1	U.S. PAT	ENT	DOCUMENTS	S /	-	,	•
Examiner						_					2000		Filing D	ate If	
Initial	Document Number Date										Name	Class.	Subclass	Appropi	
				_	<u> </u>	_			ļ			ļ			
					_	_				ļ				 	
			_	\vdash	\vdash	-	-	-		 		 			
				┝	┝	┼	-	├		-				+	
			1	\vdash	\vdash	1	一		ļ — — — —	 				+	
			 		\vdash	T	\vdash					†		†	
						1		厂				<u> </u>		-	
			<u> </u>		<u> </u>									<u> </u>	
_							I	FO]	REIGN I	PATE	NT DOCUME	NTS			
Examiner												Translation			
Initial		Document Number						1-	Date		Country	Class	Subclass	Yes	No
M/M		9	6	4	0	1	7	9	12/1996	WO/				4	
		6	8	5	6 5	4 M	6	5	03/1989	Euro Franc				, X	
		5	2	4	7	M	_	\vdash	07/1967	Fran				X	
- 		4	4	3	ó	M	_	\vdash	09/1996	Fran				X	
		1	0	8	3	0	2	5	03/1989		n (Abstract only)			 	
1/	5	3	0	5	2	6	1	2	05/1978		(Abstract only)	<u> </u>			
		01	H	ER	De	$\overline{\mathbf{OC}}$	UM	Œ	NTS (Inc	ludin	g Author, Title	, Date, P	ertinent Pa	ages, Et	c.)
111/11											Infectious Diseases				
/1/010 (
				,	_/	2,									
EXAMINE	R d	///	1/1	-	11	7/	1/	_			DATE_CONSID	ERED	C/> A	/2 -	
		[//		^			v	_ `					3/5 U/	02	
					-								1		
EVANINE	D · I	niti	al i	fci	tat	ion	001	neid	dered wh	ether	or not citation is	in confe	rmance wi	th MDEI	2 600

Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

(Form PTO-1449)